

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL Democratic Senatorial Campaign Committee		<input type="checkbox"/> (Check if name is changed) SECRETARY OF THE SENATE	2. DATE 12/18/96
(b) Number and Street Address 430 S. Capitol Street, SE		<input type="checkbox"/> (Check if address is changed) PUBLIC INFORMATION	3. FEC IDENTIFICATION NUMBER C00043266
(c) City, State and ZIP Code Washington, DC 20003		DEC 20 AM 9:33	4. IS THIS STATEMENT AN AMENDMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

5. TYPE OF COMMITTEE (Check one)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate	Candidate Party Affiliation	Office Sought	State/District

- (c) This committee supports/opposes only one candidate, _____ (name of candidate) and is NOT an authorized committee.
- (d) This committee is a National committee of the Democratic Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
Louisiana/DSCC Election Fund	430 South Capitol Street Washington, DC 20003	Joint Fundraising Committee

Type of Connected Organization
 Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position
Paul Johnson	430 S. Capitol Street, SE, Wash., DC 20003	Treasurer

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
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Paul Johnson	430 S. Capitol Street, SE, Wash., DC 20003	Treasurer
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Darlene Setter	430 S. Capitol Street, SE, Wash., DC 20003	Asst. Treasurer
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9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
NationsBank	730 Fifteenth Street, NW, Wash., DC 20005

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER Paul Johnson	SIGNATURE OF TREASURER 	DATE 12/18/96
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.



For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-237-3120

FEC FORM 1
(revised 4/87)